PTO/SB/14 (08-05)

Approved for use through 07/31/2005, OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMS control number Attorney Docket Number

Application Number

The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.
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METHOD FOR THE TRANSMISSION OF DATA

Application Data Sheet 37 CFR 1.76

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Title of Invention

112740-1134

Portions or all of the ap 37 CFR 5.2 (Paper f												
Applicant Informa	tion:											
Applicant 1										Remo	we	
Applicant Authority (1)	nventor OL	egal R	epresentativ	e under	35 U	J.S.C. 117	7	OPa	rty of In	terest un	nder 35	U.S.C. 118
Prefix Given Name	- 1	Middle Name			Fam	ily Na	eme			Suffi		
Hyung			Nam				Choi					
Residence Information	(Select One)		JS Residenc	, 0		n US Res	sidency	0	Activ	US Mili	itary S	ervice
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Citizenship under 37 CF		DE										
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Address 2												
City Hamburg				S	State	e/Provin	ICB					
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Application Inforn	nation:											
Title of the Invention	METHOD I	FOR TI	HE TRANSN	MISSION	OF I	DATA						
Attorney Docket Number	112740-11	34			Sr	nall Ent	ity Sta	atus (Claime	d 📋		
Application Type	Nonprovisi	onal										
Subject Matter	Utility											
Suggested Class (if any)				St	ub Class	s (if ar	ny)				
Suggested Technology	Center (if an	y)			-							
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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	112740-1134					
		Application Number						
Title of Invention METHOD FOR THE TRANSMISSION OF DATA								
Publication Information:								
Request 6	Request Early Publication (Fee required at time of Request 37 CFR 1.219)							
Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application flied in another country, or under a multilateral agreement, that requires publication at eighteen months after filling.								

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.

Please Select One:	Customer Number	US Patent Practitioner	US Representative (37 CFR 11.9)
Customer Number	29177		

Domestic Priority Information:

This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)

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Prior Application Status	Pending		Remove
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)

Additional Domestic Priority Data may be generated within this form by selecting Add the Add button

Foreign Priority Information:

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		Hos	move
Application Number	Country i	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
10345220.6	DE	2029-03-09	Yes ○ No
Additional Foreign Priority Add button.	Data may be generated within to	his form by selecting the	Add

Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

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Assignee 1

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Application Data Sheet 37 CFR 1.76		Attorney Docket Numbe	r 112740	-1134		
		Application Number				
Title of Invention METHOD FOR THE TRANSMISSION OF DATA						
Organization Name Siemens Aktiengesellschaft						
Mailing Address Information:						
Address 1 Wittelsbacherplatz 2						
Address 2						
City	Muen	chen	State/Pro	vince	DE	
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Phone Number			Fax Numi	ber		
Email Address						
Additional Assignee Data may be generated within this form by selecting the Add						

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.							
Signature	/Peter Zura/		Date (YYYY-MM-DD) 2006-03-29				
First Name	Peter	Last Name	Zura	Registration Number	48,196		

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